## PART B - FEE(S) TRANSMITTAL

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ة <sup>به</sup> مین	Complete and send t	Complete and send this form, together with applicable fee(s), to: <u>Mail</u> or <u>Fax</u>				Mail Stop ISSU Commissioner f P.O. Box 1450 Alexandria, Vir (703) 746-4000		
	INSTRUCTIONS: This for appropriate. All further co-indicated unless corrected maintenance fee notificatio	orm should be used for training trespondence including the below or directed otherwise ns.	Patent, advance of in Block 1, by (			OF maintenance fees of mespondence address	uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
	CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for	any change of address)	1 -	n 200	Note: A certificate of Fee(s) Transmittal. The Papers Fach addition	f mailing can only be used this certificate cannot be used all paper, such as an assignment of mailing or transmission.	for domestic mailings of the for any other accompanying
		590 12/03/2004		EB 1		have its own certifica	te of mailing or transmission.	ient of formal drawing, must
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02/11/2	2005 MBERHE1 000000Å	9 041679 10058491				Stephan P	. Gribok	(Depositor's name)
01 FC:					Xtegler &	ubi	(Signature)	
02 FC:1	1504 300.00 DA 15001 15.00 DA				February	8, 2005	(Date)	
	APPLICATION NO.			FIRST NAMED INVEN		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/058,491	10/058,491 01/28/2002			Blessing	3	3201-216 (D4700-00227)	2282
1	TITLE OF INVENTION: S.  APPLN. TYPE	ISSUE FEE PU			UBLICATION FEE	TOTAL PERSON NIT		
	nonprovisional	SMALL ENTITY NO	133021			\$300	TOTAL FEE(S) DUE \$1670	DATE DUE
1	EXAMINER		ART UN			ASS-SUBCLASS	31070 7	03/03/2005
	HWU, D	3752			239-394000	J		
	<u>.</u>							
1	1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
:	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							locument has been filed for
	(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Hansgrohe AG  Schiltach, Germany							
								_
-	Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity  4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.							
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5		(from status indicated above MALL ENTITY status. See 3	)	_	Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
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_	Authorized Signature Stephen Gull					Date_Feb	ruary 8, 2005	
	Typed or printed name	Stephan P. Gri	<del></del>		Registration	No. 29,643		
ti E A	nis form and/or suggestions lox 1450, Alexandria, Virgin Mexandria, Virginia 22313-1	for reducing this burden, shinia 22313-1450. DO NOT S	ould be sent to the SEND FEES OR C	Chief Inform COMPLETED	ation Of FORMS	ficer, U.S. Patent and TO THIS ADDRESS	he public which is to file (ann minutes to complete, includin mments on the amount of tir Trademark Office, U.S. Depi E. SEND TO: Commissioner displays a valid OMB control	ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,